

Stanford University Medical Center

Privileges in General Surgery Delineation of Privielges

SAMPLE

	Required Qualifications
Education/Training	Successful completion of an ACGME or AOA-accredited residency/fellowship in general surgery or foreign equivalent training.
	AND
	Current certification or active participation in the examination process leading to certification in general surgery by the American Board of Surgery or the American Osteopathic Board of Surgery or foreign equivalent training/board.
Additional Credentialing Criteria (Initial and	To be granted Central Venous Catheter Insertion must complete "Getting to Zero" educational module at both initial and reappointments
Reappointment)	In accordance with Hospital Sedation Policy and completion of the SHC sedation exam taken every 2 years
	Use of Fluoroscopy Equipment- Valid Radiology Supervisor and Operator Certificate or Fluoroscopy Supervisor and Operator Permit Required
	Teaching appointment to work in SHC outpatient clinics
	Membership and privileges at LPCH to admit, treat patients 14 years old and younger
	Use of Laser - Training during residency or documentation completion of Laser Course
Clinical Experience (Initial)	••
Advanced laparoscopic including Nissens, adrenals, spleens, bowels, pancreas; Liver surgery excluding biopsy; Pancreatic surgery	Successful completion of laparoscopic surgery fellowship (Advanced Laparocopic) Hepato-Biliary-Pancreatic fellowship (Liver and Pancreatic surgery) -OR- Training with didactic experience, hands on experience, participation as first assistant and performance of the operation under proctorship.
Percutaneous endoscopic gastrostomy (PEG)	Formal Fellowship Training in Gastroenterology or a Residency in General Surgery.
lleo-anal pull through	Colorectal Surgery Fellowship.
Trauma Published: 12/11/2013	Trauma training by fellowship or experience of 100 documented cases (must provide documentation log). Must complete separate Trauma privilege form and meet all criteria.
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Surgical critical care	Must complete separate Critical Care Privilege Form and meet all criteria. Fellowship in Surgical Critical Care.
Colonoscopy	Minimum of 50 cases during residency and at least 20 cases in the past two years - documentation log required.
Radiosurgery of Breast Lesions	1) Accuray training course; 2) Observe ten (10) cases; 3) Proctored for 5-10 cases; 4) Stanford XRT letter of approval; 5) Letter from co-director of cyberknife procedure.
Breast biopsy with sonographic guidance	Demonstrate credentials in a course for breast biopsy with ultrasound guidance and have documentation that it has been done effectively in 10 patients.
Robotic surgery	1) Advanced laparoscopic and thoracoscopic training; 2) Intuitive two-day training course; 3) Fundamentals of laparoscopic surgery course (recommended) FLS; 4) Five (5) cases assisted by an approved surgeon 5) Ten (10) cases proctored by an approved surgeon.
Intestinal and Multi-organ abdominal transplantation; Kidney; Llver; Pancreas Transplantation Surgery;	Completion of an American Society of Transplantation Surgery approved Fellowship in multi-organ transplantation.
Bariatric surgery Newly trained surgeons <3	Successful completion of an ACGME approved General Surgery residency or equivalent for foreign trained physicians Satisfactorily completed a general surgery residency and performed at least 100 laparoscopic bariatric operations and at least 10 open bariatric procedures OR
	Satisfactorily completed a general surgery residency followed by a Fellowship Council approved bariatric surgery fellowship where at least 100 laparoscopic bariatric operations and at least 10 open bariatric procedures are performed OR
	Satisfactorily completed a general surgery residency with 10 open bariatric procedures followed by a Fellowship Council approved bariatric surgery fellowship where at least 100 laparoscopic bariatric operations were performed. Certification by American Board of Surgery (ABS) or American Osteopathic Board of Surgery (AOBS); or, ABS/AOBS board eligible, which is contingent upon completion of oral ABS/AOBS or equivalent for foreign trained physicians.
Bariatric surgery Established Surgeons >	Completion of general surgery residency and Fellowship Council bariatric fellowship OR ,if no fellowship performed, documentation of 500 lifetime bariatric cases Certification or re-certification by American Board of Surgery (ABS) or American Osteopathic Board of Surgery (AOBS); or, ABS/AOBS board eligible, which is contingent upon completion of oral ABS/AOBS. Non-Board Certified Surgeons will not be considered for Stanford University Medical Center Privileging in Bariatric Surgery Documentation of 12 bariatric surgery CME credits in past two years (may include courses or meetings) Surgeon experience: 100 approved cases over past 24 months. Applying surgeons must submit their past two year bariatric experience to the Director of Bariatric Surgery using the Appendix 2 case log format. Based upon review, privileges will be granted on a procedure by procedure basis for the Accepted Standard Bariatric Surgery Procedures.
Clinical Experience (Reappointment)	Minimum 50 Core cases required during the past 2 years. Minimum of 6 cases required during the past 2 years - Advanced Iaparoscopic including Nissens, adrenals, spleens, bowels, pancreas Minimum 5 cases required for each during the past 2 years - Liver surgery excluding biopsy; Pancreatic surgery; Trauma; Surgical critical care; Radiosurgery of Breast Lesions; Breast biopsy with each market biopsy.
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	 Minimum 10 cases required during the past 2 years - Ileo-anal pull through; Liver Transplantation Surgery Minimum 50 cases required during the past 2 years - Colonoscopy Minimum 4 cases required during the past 2 years - Intestinal and Multi-organ abdominal transplantation Minimum 15 cases required during the past 2 years - Kidney Transplantation Surgery Bariatric Surgery - All surgeons must maintain at least 100 cases over 24 months and submit case logs (see Appendix 2) annually to the Chief of Bariatric Surgery. Each bariatric surgeon who successfully performs 500 bariatric cases at Stanford will always be considered a bariatric surgeon in good standing from a volume standard.
FPPE Chart Reviews	 FPPE CRITERIA LISTED BELOW. FPPE WILL BE ASSIGNED BY THE SERVICE CHIEF DURING THE APPROVAL PROCESS 12 chart reviews - Core 5 chart reviews - Administration of Moderate Sedation 3 chart reviews - Advanced laparoscopic including Nissens, adrenals, spleens, bowels, pancreas; Percutaneous endoscopic gastrostomy (PEG); Liver surgery excluding biopsy; Pancreatic surgery; lleo-anal pull through; Trauma; Surgical critical care; Colonoscopy; Radiosurgery of Breast Lesions; Breast biopsy with sonographic guidance; Robotic surgery; Kidney Transplantation Surgery; Liver Transplantation Surgery 1 chart review - Use of Laser 2 chart reviews - Intestinal and Multi-organ abdominal transplant; Pancreas Transplantation Surgery
FPPE Observations	 3 observations - Core privileges; Kidney Transplantation Surgery; Liver Transplantation Surgery 1 observation - Advanced laparoscopic including Nissens, adrenals, spleens, bowels, pancreas; Percutaneous endoscopic gastrostomy (PEG); Liver surgery excluding biopsy; Pancreatic surgery; Ileo-anal pull through; Trauma; Surgical critical care; Colonoscopy; Radiosurgery of Breast Lesions; Breast biopsy with sonographic guidance; Robotic surgery 2 observations - Intestinal and Multi-organ abdominal transplantation; Pancreas Transplantation Surgery Bariatric Surgery - Must be successfully proctored in the OR by the Chief of Bariatric Surgery for 3 cases with a total of 10 cases to be submitted in writing adhering to the Appendix 2 format. Until proctoring is complete, privileges are temporary.

Provide care on LPCH patients in specific areas of SHC

Request	Request all privileges listed below. Uncheck any privileges that you do not want to request.	Division Chief Rec	Service Chief Rec
	Additional Request		
	ONLY provide care of patients in the SHC Emergency Department, ASC, Cath Lab, Cancer Center or Endo Unit - requires Active or Courtesy Status at LPCH		

Core Privileges

Request	Request all privileges listed below. Uncheck any privileges that you do not want to request.	Division Chief Rec	Service Chief Rec
	Privileges to admit, evaluate, diagnose, consult, perform history and physical exam, provide pre-, intra- and postoperative surgical care and perform surgical procedures including:		
	Conditions, illnesses and injuries of the alimentary tract, abdomen and its contents (except as specified in Additional Privileges)		
	Breasts, skin and soft tissue (except as specified in Additional Privileges)		
	Head and neck, including trauma, vascular, endocrine, congenital, and oncologic disorders - particularly tumors of the skin, salivary glands, thyroid, parathyroid, and oral cavity		
	Endocrine system, including thyroid, parathyroid, adrenal, and endocrine pancreas		
	Insertion and management of chest tubes and central venous catheters		
	Lumbar puncture		
	Pericardiocentesis, tracheostomy, paracentesis, thoracentesis		
	Basic laparoscopy including diagnostic, laparoscopic appendectomy, laparoscopic cholecystectomy, hernia		
	Sentinel node biopsy for cancer		

General Surgery Privileges

Description: (Including Transplant Surgery)

Request	Request all privileges listed below. Uncheck any privileges that you do not want to request.	Division Chief Rec	Service Chief Rec
	Administration of Sedation		
	Use of fluoroscopy equipment (or supervision of other staff using the equipment)		
	Treatment of patients in outpatient clinics at Stanford Hospital & Clinics		
	Admit, treat, evaluate or provide follow-up care for inpatients ages 14 years or younger		
	Advanced laparoscopic including Nissens, adrenals, spleens, bowels, pancreas		
	Percutaneous endoscopic gastrostomy (PEG)		
	Liver surgery excluding biopsy		
	Pancreatic surgery		
	Ileo-anal pull through		
	Trauma		
	Surgical critical care		
	Colonoscopy		
	Radiosurgery of Breast Lesions		
	Breast biopsy with sonographic guidance		
	Robotic surgery		
	Use of Laser		
	Intestinal and Multi-organ abdominal transplantation		
	Kidney Transplantation Surgery		
	Liver Transplantation Surgery		
	Pancreas Transplantation Surgery		

Bariatric surgery

Description: (see Advanced Laparoscopic Surgery) Request Appendix 1 and 2 from the Medical Staff Office

Request	Request all privileges listed below. Uncheck any privileges that you do not want to request.	Division Chief Rec	Service Chief Rec
	Accepted Standard Bariatric Surgery Procedures: Roux-en-Y Gastric Bypass, Adjustable Gastric Banding, Sleeve Gastrectomy, Urgent or Emergent Surgery Due to Complications from Bariatric Surgery, Revisional Bariatric Surgery. Any additional procedure for weight loss not on the Accepted Standard Bariatric Surgery Procedures List must be approved in advance by the Chief of Bariatric Surgery.		

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